42A806 (9-02)
Commonwealth of Kentucky
REVENUE CABINET

TRANSMITTER REPORT FOR FILING KENTUCKY WAGE STATEMENTS

1	2	3
For Official Use		

Name and Address of Transmitter	5. Number of Kentucky Statements
	6. Kentucky Taxable Wages
	7. Kentucky Income Tax Withheld
2. KY Withholding Account Number	Name and Address of Persons to Contact About Magnetic Tape/3.5" Diskette/Cartridge
3. Tax Year	
4. Phone Number (Include Area Code)	

INSTRUCTIONS FOR PAPER FILERS

Please complete boxes (1) through (7) and mail with the wage statements to:

Kentucky Revenue Cabinet Frankfort, KY 40620-0004

INSTRUCTIONS FOR MAGNETIC MEDIA FILERS

Please complete boxes (1) through (8) and mail with the magnetic media to:

Kentucky Revenue Cabinet W-2 Magnetic Media Processing 200 Fair Oaks Lane, Station 57 Frankfort, KY 40620

If more than one Kentucky withholding account is reported on the magnetic media, omit lines 2, 5, 6 and 7, and attach a summary sheet showing name and address, Kentucky withholding tax account number, number of Kentucky statements, Kentucky taxable wages and Kentucky income tax withheld for each account.

This Transmitter Report must be filled out and submitted with your wage and tax statement media by January 31 following the close of the calendar year. Photocopies of this Transmitter Report are Acceptable.

